



Secondary Epilepsy awareness assembly

Better futures for
young lives with epilepsy
youngepilepsy.org.uk



Secondary Epilepsy awareness assembly - plan

Title: Epilepsy Awareness

Focus: The brain, seizures, seizure first aid and inclusion/social impact of epilepsy.

Duration: 20-25 minutes

Prior learning: No prior learning is required. Several aspects of this assembly are covered in further detail in the Young Epilepsy KS3 lesson plans and additional worksheets.

Learning outcomes:

1. To be able to describe epilepsy as a medical condition where there is a problem with the electrical messages in the brain.
2. To realise that there are many types of seizures that can look very different from one another.
3. To be able to recall how to keep someone safe during a tonic clonic seizure
4. To appreciate that young people with epilepsy often get left out of activities due to fears about their safety and that this can affect them socially and emotionally.
5. To understand that young people with epilepsy can join in activities like everyone else so long as they take safety precautions.

Young Epilepsy resources required:

Secondary Epilepsy awareness assembly - presentation

PLEASE NOTE: If you are using the PDF presentation, there will be a slight alteration to the slide numbers in this plan.

Further lesson plans, worksheets and activities are available from the Young Epilepsy website:

<http://youngepilepsy.org.uk/what-we-do/helping-schools/resources-for-schools>

Starter/Introduction

Slide	Key idea	Content
1	Young Epilepsy	- Tell pupils that today's assembly has been put together by a charity called Young Epilepsy: - Young Epilepsy work with young people just like you, as well as younger children in primary school and those who go to college and university. - They raise awareness of a medical condition called epilepsy. Both children and adults can have epilepsy but Young Epilepsy only focus on childhood epilepsy. - Ask pupils to put their hand up in response to the questions below. To encourage participation, tell pupils you are not going to ask for answers to the questions, you just want a show of hands: - Had you heard of epilepsy before this assembly? - Who thinks they know what epilepsy is? - Would you know how to help somebody with epilepsy if they needed it? - Tell them that if we asked a room full of adults the same three questions, their responses would probably be similar. Lots of people have heard about epilepsy, not many could explain what it is and not many feel confident to help someone.
2-4	Why do we need to learn about epilepsy?	Many people including children have epilepsy: Lots of people have epilepsy in the UK, including both adults and children. In fact, 63,000 children and young people aged 18 and under have epilepsy in the UK – that's more than enough to fill Arsenal's Emirates Stadium! More people have epilepsy than we realise because medication keeps lots of people well and some people may not want to talk about it. Chances are, most people will come into contact with someone who has epilepsy, at some point in their life. Even famous people have epilepsy! Show the pictures of the famous people who have epilepsy,

Slide	Key idea	Content
		had it as a child or were thought to have had it – did they realise this? Can they identify anyone? Emphasise they are all successful and did/ have not let epilepsy stop them leading a normal, active life. 1. Philip Martin Brown – Actor and star of Waterloo Road. Was diagnosed with epilepsy at 19. 2. Dai Greene, a hurdler who has won medals in the European and Commonwealth games and narrowly missed out on a bronze medal in the London 2012 Olympics. Diagnosed with epilepsy as a teenager. 3. Edith Bowmann – Radio 1 DJ, presenter and producer. Had epilepsy when she was younger. 4. Julius Caesar – A Roman general thought to have had epilepsy. • Epilepsy can take effect suddenly, often without warning. This can be scary for those who are around the person with epilepsy and might cause them to panic. However, these feelings soon pass if we know what is going on. • We can all help people with epilepsy to stay safe. There are just a few key things that anyone could do to help keep someone with epilepsy safe. People with epilepsy will also feel more confident if they know people around them understand how to help!

Main

Slide	Key message	Content
5-6	You cannot catch epilepsy	- Tell pupils you are now going to look at what epilepsy is. - Show the picture of the man sneezing and ask pupils why they think you have shown this. - Establish that epilepsy is not catching, like a cold or flu! If someone with epilepsy sneezed or coughed, you would not catch epilepsy. It is not contagious.
7	It's the brain	- Tell pupils that in epilepsy, there is a problem in a certain part/organ of the body – do they know what part of the body you are talking about? - Establish it is the brain and show the picture. - Explain that the different colours on the diagram show us that the brain is made of lots of different parts (called lobes). Different parts of the brain do different jobs. Our brains are the control centre of our bodies and help us to do lots of things and make us who we are.
8-9	What does the brain do?	- Ask pupils to suggest things that our brains control. - The images on the slide illustrate some of the key functions of the brain. Establish that our brains control everything we do, think and feel. Examples of functions are: sight, smell, hearing, taste, touch, movement, emotions and automatic functions of the body like digestion and heart rate.
10-11	Key point 1 (Epilepsy)	- Ask pupils: How does the brain control so many things and so quickly? What does it use? For example, how does our brain tell our hand to move when we wave it? It uses something that moves very quickly. - Establish that the brain sends electrical messages around the body to control it using specialised cells called neurones. (The picture on slide 10 illustrates this.)

Slide	Key message	Content
12	Key point 2 (Seizures)	• <u>Read out Key point 1: Epilepsy is caused by a problem with the electrical messages in the brain.</u> • <u>Read out Key point 2: People with epilepsy experience sudden bursts of electricity in the brain - called a seizure (scientific term for a fit). Seizures disrupt the way the brain works for a short time.</u> You could expand on this by saying that the disruption in the brain changes the person's behaviour or they way they feel for a short time. • If anyone were to ask about the cause of epilepsy, tell pupils that some people have epilepsy because a part of their brain has been injured. This may have happened during pregnancy or a difficult birth. An illness or serious head injury could also be the cause. Some types of epilepsy can be passed down through families. However, 60% of the time we do not know what causes someone's epilepsy.
	What do seizures look like?	• Ask pupils: What might it look like when someone has a seizure? • Take feedback from a few pupils. • Establish that because the brain controls so many different things, there are lots of different types of seizures. But for each person, although they may have more than one different type of seizure, they usually look the same each time.
13	Focal seizures	• Show the image of the brain and tell pupils that when someone has a focal seizure, the electrical messages only cause disruption in one part of the brain. Anything that this area of the brain normally controls (as discussed in the earlier activity) could become temporarily disrupted.

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		- Progress the presentation and ask what might happen if the area of the brain which controls sight (the occipital lobe – <i>shown in green</i>) has a seizure and becomes disrupted? - Take feedback and summarise that the person could experience temporary blindness, hallucinations or distorted vision. They're not choosing to do these things – it's happening automatically because electrical signals are disrupted during the seizure. It will take a few minutes for the brain to sort the disruption out and once it has, they will return to normal. - The presentation gives further examples of what could happen to somebody else with epilepsy if their seizures affected a different area of the brain. The following provides some simple examples of what could happen: <table><tr><td>Parietal lobe (<i>yellow</i>)</td><td>This is responsible for sensory (or feeling) information (like touch, temperature, pressure, pain etc.) and orientation. A seizure in this area might result in a feeling like pins and needles, warmth, or numbness, down one side of the body. It could make the person have a strange feeling in their stomach.</td></tr><tr><td>Temporal lobe (<i>blue</i>)</td><td>One of the things it controls is speech. What might happen to the person's speech during a seizure? It may become slurred, they may be unable to speak or speak in a confused way which doesn't make sense.</td></tr><tr><td>Frontal lobe (<i>pink</i>)</td><td>Amongst many things it controls movements, behaviour and attention. A seizure in this area might make the person walk around in a confused manner, pluck at their clothes or make strange facial expressions.</td></tr></table>	Parietal lobe (<i>yellow</i>)	This is responsible for sensory (or feeling) information (like touch, temperature, pressure, pain etc.) and orientation. A seizure in this area might result in a feeling like pins and needles, warmth, or numbness, down one side of the body. It could make the person have a strange feeling in their stomach.	Temporal lobe (<i>blue</i>)	One of the things it controls is speech. What might happen to the person's speech during a seizure? It may become slurred, they may be unable to speak or speak in a confused way which doesn't make sense.	Frontal lobe (<i>pink</i>)	Amongst many things it controls movements, behaviour and attention. A seizure in this area might make the person walk around in a confused manner, pluck at their clothes or make strange facial expressions.
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14	Absence seizures	• Reveal the slide showing the picture of the girl reading. • Tell pupils that absences are one of many types of seizures where the burst of electrical activity disrupts ALL of the brain at once (shown by the small diagram of the brain). • Say: 'During absence seizures the person will suddenly freeze and stop what they are doing for a few seconds but will remain standing or sitting as they were before'. However, halfway through saying this sentence, freeze for a few seconds and just stare straight ahead. Then continue as though nothing happened. • Tell pupils that absence seizures (if not well controlled with medication) can happen many times in a day so they will miss lots of bits of information unless you realise this is happening and help them catch up. They might need your help to stay safe because they could suddenly stop in the middle of the road for example. • Establish that absences are not the same as daydreaming because the person is actually unconscious and will not respond to anything during this time.
15	Key point 3	• <u>Read out Key point 3: During a seizure, the person cannot stop what is happening to them. Afterwards they may feel tired and a bit groggy.</u> • Explain that many young people need to rest and even sleep after a seizure (not likely for brief seizures such as absences though). It is also very unlikely they will remember anything that happened during most seizures.
16	Tonic clonic seizures	• Reveal the slide showing the illustration of a tonic clonic seizure. Like absences, this is a generalised seizure where the burst of electrical activity disrupts ALL of the brain at once. • Explain that tonic means stiffening and clonic means shaking or convulsions. Firstly, the person becomes unconscious and then the electrical messages are sent out of the brain to all the muscles in the body at once, making them go stiff. • Ask pupils to extend one arm out and clench their fist. The muscles go hard because our brains are

Slide	Key message	Content
		sending electrical messages to our arm muscles. To stand normally we need a mixture of muscles being relaxed and stiff. Therefore, when all of the muscles become stiff during this seizure, it causes the person to fall over. • Refer to the 'tonic' picture on the slide. It shows that the girl's muscles have stiffened over her entire body. • Once the person has fallen over, the muscles then begin to relax and contract rhythmically, causing their body to shake. This is called the clonic phase. • The person will not feel any pain during the seizure because of the disruption in the brain, but if they injure themselves by falling on hard ground or banging their head, arm or any other part of their body against a hard surface, they will feel it after the seizure has passed. • Most tonic clonic seizures last no more than 2-3 minutes.
17 & 18	Key point 4 Seizure first aid	• <u>Read out Key point 4: During a seizure, we need to keep the person safe.</u> • The seizure first aid cartoon shows a group of pupils helping someone who is having a tonic clonic seizure. If you plan on following this assembly up with the Young Epilepsy KS3 lessons, you could leave this activity until then and instead just cover the very basics (e.g. getting a teacher/adult and cushion the head.) • Ask pupils for suggestions about what each pupil in the cartoon is doing to help (and why if time permits). Each click of the presentation reveals what the each pupil(s) is doing to help: 1. Time the seizure. If the seizure continues for longer than 5 minutes, an ambulance should be called. The paramedics may give the person emergency medication which will help to stop the seizure. Some pupils may have this medication at school. 2. Tell an adult or get additional help. 3. Put something soft under the head. The ground is often hard and most seizures occur suddenly and without warning so the person cannot control where they fall. If you don't have a pillow, use a jumper or anything else that's soft.

Slide	Key message	Content
19 & 20		4. Keep the area safe. Prevent people crowding round to watch, which won't help anyone. 5. Move things out of the way so the person doesn't hurt themselves by banging against hard or sharp objects. It wouldn't hurt at the time because the messages aren't getting to the brain, but when the seizure finishes, it could really hurt. 6. After a few minutes the person wakes up. They may feel tired as their muscles have all been very active – as if you had been taking part in energetic sport. So just speak calmly to reassure them when they come round. 7. Put them on their side AFTER the shaking has stopped. Moving a person during a seizure can be difficult and may cause injury to both the person, and the helper.
	Living with epilepsy, safety and inclusion Key point 5	• Show the slide entitled 'Living with epilepsy' and the picture of swimming. Explain that sometimes, people can be so worried about keeping those with epilepsy safe that they don't let them do some of the activities that most other young people their age are allowed to do. • Ask pupils to put up their hand if they think it is safe for a young person with epilepsy to go swimming. Then ask them for their reasons why it might not be safe- what could happen? Establish that they could go under the water and even drown. • However, ANYONE could get into trouble in the water - just like anyone can trip up or come off their bike or skateboard. It doesn't mean we give up. Young people with epilepsy are no different - they just have to take sensible safety precautions. • Ask pupils for ideas about how we could make swimming safer for a young person with epilepsy. Establish that they should tell the lifeguard (whose job it is to keep everyone safe) and swim with a confident swimmer nearby in the pool who knows about their epilepsy. • Reveal the other pictures on this slide and ask pupils what they think these have to do with what you have just been discussing. Take ideas and establish that concerns over safety can cause conflict with parents and also issues with going out with friends (usually because the friends, or the young person themselves, are afraid of what might happen in the event of a seizure).

Slide	Key message	Content
		• <u>Read out Key point 5: People with epilepsy can join in most activities just like everyone else.</u> (If they ask why this says ‘most’ you could discuss things like driving where the person has to have been seizure free for a year before they can drive).

Plenary/Summary

Slide	Key message	Content
21 & 22	Recapping Key points	- Ask pupils if they can remember the key points from the assembly? The pictures should help them but you could prompt their memory with the following hints: Hint: What/where is the problem in epilepsy? Key point 1: In epilepsy, there is a problem with the electrical messages in the brain. Hint: What can happen to the electricity in the brain in epilepsy and what this is called? Key point 2: People with epilepsy experience sudden bursts of electricity in the brain - called a seizure. Seizures disrupt the way the brain works for a short time. Hint: Can a person control what is happening to them during a seizure? How might they feel afterwards? Key point 3: During a seizure, the person cannot stop what is happening to them. Afterwards, they may feel tired and a bit groggy. Hint: What is our job when someone has a seizure? Key point 4: During a seizure, we need to keep the person safe. Hint: What did we discuss about young people with epilepsy doing normal activities? Key point 5: People with epilepsy can join in most activities just like everyone else.